1915(i) Policy

Remote Support Service Delivery

Remote support includes real-time, two-way communication between the service provider and the participant. Remote support is limited to check-ins (e.g. reminders, verbal cues, prompts) and consultations (e.g. counseling, problem solving) within the scope of service.

Remote support options include:
- o Telephone
- o Secure Video Conferencing

The keys to providing better member care lies in making services available and ensuring members seek help when necessary. Remote support options are for the benefit of the member, rather than the benefit of the provider. The member's election to utilize remote support must enhance their integration into the community.

Examples of appropriate use of remote support include:
- Members with behavioral health conditions who are feeling stigmatized and, thus, avoiding seeking services in an effort to hide their conditions from others. Remote support will allow these members to receive services from the comfort of their own surroundings, reducing the stigma and increasing the chances they will seek services and stay engaged. Remote support alternatives will make ongoing care and follow-ups more convenient and easier to schedule for the member, likely increasing the number of appointments made, as well as the number of appointments kept.
- Members in the midst of a crisis situation or addiction relapse will be able to more easily reach out to 1915(i) service providers reducing risks associated with their conditions and the likelihood of needing a higher level of care.

Remote support must:
- be elected by the individual receiving services;
- not block the member's access to the community;
- not prohibit needed in-person services for the member;
- utilize a HIPPA compliant platform; and
- prioritize the integration of the member into the community.

Documentation Requirements
For each utilization, providers must document that the remote support option:
- was elected by the member receiving services;

- did not block the member's access to the community;
- did not prohibit needed in-person services for the member;
- utilized a HIPAA-compliant platform; and
- prioritized the integration of the individual into the community.

Providers may not:
- Bill direct support delivered remotely when the exchange between the service participant and the provider is social in nature.
- Bill direct support delivered remotely when real-time, two-way communication does not occur (e.g. leaving a voicemail; electronic messaging).
- Bill for the use of Global Positioning System (GPS), Personal Emergency Response System (PERS), and video surveillance to provide remote check-ins or consultative supports.